

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SL</i>		
O.I.P.E. CLASSIFIER		49	8/31/01
FORMALITY REVIEW	<i>YF</i>	956	09/18/01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	1091	11-09-01

INDEX OF CLAIMS

- ..... Rejected
- ..... Allowed
- (Through numeral)..... Canceled
- ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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*11/10/01*  
*258*